FLARCE

PTO/SB/30 (09-04)
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Request For Continued Examination (RCE) Transmittal

Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	10/027,134-Conf. #4419
Filing Date	December 20, 2001
First Named Inventor	Parris S. Wellman
Art Unit	3739
Examiner Name	A. F. Roane
Attorney Docket Number	102863-0017

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

8, 1995, or to any design application.	y to any almy or plant application med prior to built			
Submission required under 37 CFR 1.114 Note: If the RCE is proper, are amendments enclosed with the RCE will be entered in the order in which they we applicant does not wish to have any previously filed unentered amendment(s) en amendment(s).	ere filed unless applicant instructs otherwise. If			
a. The previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.				
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
ii. X Other Enter Amendment filed on November 15, 2	004			
b. Enclosed i. Amendment/Reply iii. Information ii. Affidavit(s)/Declaration(s) iv. Other	Disclosure Statement (IDS)			
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b Other				
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 v	when the RCE is filed.			
	ve enclosed a duplicate copy of this sheet.			
i. X RCE fee required under 37 CFR 1.17(e) ii. Extension of time fee (37 CFR 1.136 and 1.17) 790.00 OP				
iii. Other	C:1801			
b. X Check in the amount of \$ 790.00 enclo	osed			
c. Payment by credit card (Form PTO-2038 enclosed)				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Signature	Date January 5, 2005			
Name (Print/Type) Lisa J. Michaed	Registration No. 44,238			
Request for Continued Examination Trai	nsmittal			

Request for Continued Examination Transmittal
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 5, 2005

Signature: (Lisa J. Michaud)

PTO/SB/17 (12-04v2)
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the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/027,134-Conf. #4419 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number FEE TRANSMITTAL** December 20, 2001 Filing Date Parris S. Wellman First Named Inventor For FY 2005 **Examiner Name** A. F. Roane Applicant claims small entity status. See 37 CFR 1.27 3739 Art Unit

TOTAL AMOU	NT OF PAYMENT	(\$) 790.	00	Attorney Docke	t No.	102863-0017	·- ·-	
METHOD OF PAYMENT (check all that apply)								
x Check Credit Card Money Order None Other (please identify):								
Deposit Ac	Deposit Account Deposit Account Number: 141449 Deposit Account Name: Nutter McClennen & Fish LLP							
For the	above-identified depo	osit account, the	e Director is	hereby authoriz	zed to: (ch	eck all that apply))	
c	harge fee(s) indicated	d below		Char	ge fee(s) ir	ndicated below, e	xcept for the	e filing fee
	harge any additional t e(s) under 37 CFR 1		payment of	x Cred	it any oven	payments		
FEE CALCU	LATION							
1. BASIC FILIN	G, SEARCH, AND E							
	FI	LING FEES Small Entit		ARCH FEES Small Entity		NATION FEES Small Entity	1	
Application T	ype Fee (\$		Y <u>Fee (\$)</u>		Fee (\$)		Fees Pa	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		,
Provisional	200	100	0	0	0	0	•	
2. EXCESS CL	AIM FEES						5	Small Entit
Fee Description							Fee (\$)	<u>Fee (\$)</u>
	r 20 (including Reiss						50	25
_	ent claim over 3 (incl	uding Reissues)				200	100
Multiple depen					-		360	180
Total Claims	Extra Claims	Fee (\$)	Fee P	'aid (\$)		Multiple Depend		
19	- 20 = ;	× =			F	ee (\$)	Fee Paid (\$)	
Indep. Claims	Extra Claims	<u>Fee (\$)</u>	Fee P	aid (\$)		<u> </u>		_
3. APPLICATIO		<u> </u>						
	ition and drawings ex	ceed 100 sheet	s of paper	excluding elec	tronically f	filed sequence or	computer	
listings und	ler 37 CFR 1.52(e)),	the application	size fee du	e is \$250 (\$125	for small			
sheets or fr	action thereof. See 3	5 U.S.C. 41(a)	(1)(G) and	37 CFR 1.16(s)				
Total Sheet				dditional 50 or fra			Fee P	aid (\$)
100 = /50 (round up to a whole number) x =								
4. OTHER FEE	• •	0.6.7.11					Fees P	Paid (\$)
_	Specification, \$130	`	•	•		05) (07	701	
Other (e.g.,	ate filing surcharge):	1801 Requ	lest for col	ntinued exami	nation (R	CE) (see 37	790	0.00
SUBMITTED BY		4		Posistration No.				
Signature	my			Registration No. (Attorney/Agent)	44,238	Telephone	(617) 439	-2000
Name (Print/Type)	Lisa J. Michaud					Date	January 5	, 2005

300111111111111111111111111111111111111						
Signature	millo	Registration No. (Attorney/Agent)	44,238	Telephone	(617) 439-2000	
Name (Print/Type)	Lisa J. Michaud			Date	January 5, 2005	

Fee	Trans	mittal
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Dated: January 5, 2005

Signature:

(Lisa J. Michaud)